PART B - FEE(S) TRANSMITTAL

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20995									
KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. (Depositor's name)				
		•						(Date)	
APPLICATION NO. FILING DATE		· FIRST NAMED INVE		TOR	ATTOR		EY DOCKET NO.	CONFIRMATION NO.	
10/583,829 04/05/2007		Jo Klaveness			DEHNS1.001APC			8739	
TITLE OF INVENTION:	MODULATORS OF P	ERIPHERAL 5-HT REC	EPTORS						
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APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UL:	PREV. PAID ISSUE	14151	OTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0		\$1810	10/15/2010	
EXAMINER		ART UNIT							
SOLOLA, TAOFIQ A		1625	514-230200		<u> </u>				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a 2 OLSON & BEAR LLP						
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) nttached. Use of n Custo Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AN	ID RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print o	r typ	e)				
PLEASE NOTE: Unle recordation as set forth	ess an assignee is ident in 37 CFR 3.11. Comp	ified below, no assignee bletion of this form is NO	data will appear on th T a substitute for filing	ne pa gan a	itent. If an assigned	e is ident	ified below, the do	cument has been filed for	
(A) NAME OF ASSIG		(B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Serodus AS Oslo, Norway									
Please check the appropriate assignee category or categories (will not be printed on the patent): 🚨 Individual 🚨 Corporation or other private group entity 🚨 Government									
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)									
Issue Fee	☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached.								
Publication Fee (No Advance Order - #	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-1410. (enclose an extra copy of this form).								
5. Change in Entity State X a. Applicant claims	us (from status indicated SMALL ENTITY statu		b. Applicant is no						
			d from anyone other th	an th	ne applicant; a regis	tered atto	rney or agent; or the	e assignee or other party in	
Authorized Signature	Talley (· De her) .		Date Octobe				
Typed or printed name	Registration No. 51,609								
an application. Confidenti submitting the completed	ality is governed by 35 application form to the ons for reducing this burginia 22313-1450. DC 3-1450.	U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the ONOT SEND FEES OR	1.14. This collection is depending upon the ic Chief Information OCOMPLETED FORM	s esti indivi iffice S TC	imated to take 12 m idual case. Any con r, U.S. Patent and T THIS ADDRESS.	innites to inments of rademark SEND T	complete, including the amount of tink Office, U.S. Depa O: Commissioner f	by the USPIO to process) g gathering, preparing, and the you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450, number.	